



STATUTORY INSTRUMENTS.

S.I. No. 331 of 2013

PERSONAL INSOLVENCY ACT 2012 (PRESCRIBED PROTECTIVE
CERTIFICATE PERSONAL INSOLVENCY ARRANGEMENT
APPLICATION FORM) REGULATIONS 2013

S.I. No. 331 of 2013

PERSONAL INSOLVENCY ACT 2012 (PRESCRIBED PROTECTIVE
CERTIFICATE PERSONAL INSOLVENCY ARRANGEMENT
APPLICATION FORM) REGULATIONS 2013

The Insolvency Service of Ireland, in exercise of the powers conferred on it by section 3 of the Personal Insolvency Act 2012 (No. 44 of 2012) (the “Act”), hereby makes the following regulations:

1. These Regulations may be cited as the Personal Insolvency Act 2012 (Prescribed Protective Certificate Personal Insolvency Arrangement Application Form) Regulations 2013.

2. The form set out in the Schedule to these Regulations is hereby prescribed for the purposes of section 93(2) of the Act.

*Notice of the making of this Statutory Instrument was published in
“Iris Oifigiúil” of 3rd September, 2013.*

ISI Case Reference No.:

Schedule

APPLICATION FOR PROTECTIVE CERTIFICATE

(PERSONAL INSOLVENCY ARRANGEMENT)

*AN CHÚIRT CHUARDA

*[THE CIRCUIT COURT] *[THE HIGH COURT]

*THE PERSONAL INSOLVENCY ACT 2012

*[...] CIRCUIT

*COUNTY OF [...]

IN THE MATTER OF AN APPLICATION UNDER SECTION 95 OF THE
PERSONAL INSOLVENCY ACT 2012

AND IN THE MATTER OF [.....]
OF [.....],

A DEBTOR

*I/*We

of

County of

*and

of

County of

HEREBY APPLY for the making of an order for the issue under section
95(2)(a) of the Personal Insolvency Act 2012 of a protective certificate.

Dated 20

*Delete where inapplicable

Important Information and Statements

1. Unless otherwise defined in this application form, terms used herein have the same meaning as under the Personal Insolvency Act 2012 (the “Act”).
2. This application form has been prescribed by the Insolvency Service for the purposes of Section 93(2) of the Act.
3. The Insolvency Service may request any further information it requires from a debtor (the “Debtor”), or personal insolvency practitioner and defer further consideration of the application until such information is furnished to the Insolvency Service. Failure to furnish such information, within 14 days or such longer period as the Insolvency Service may (at its discretion) permit, will mean that the application shall be deemed to have been withdrawn.
4. Where the personal insolvency practitioner becomes aware of any inaccuracy or omission in this application or any document accompanying this application, he or she is required under section 93(4) of the Act to inform the Insolvency Service of this fact as soon as practicable.
5. The Insolvency Service hereby agrees to the Debtor communicating with the Insolvency Service by electronic means for the purposes of any communication or notice required or permitted to be sent or given by the Debtor to the Insolvency Service, from time to time, in connection with this Act including for the purpose of any notice referred to in section 134 of the Act. Any such communication or notice should be sent to pia@isi.gov.ie.
6. Notwithstanding any agreement by the Debtor to receiving electronic communications and notices, there may be circumstances in which the Insolvency Service will send documents, information and other communications to the Debtor in hard copy rather than electronically, in which case the Insolvency Service reserves the right to do so, including for the purpose of giving the Debtor any notice referred to in section 134 of the Act.
7. This application may be withdrawn at any time prior to the issue of a protective certificate in accordance with section 93(3) of the Act.
8. This application shall be accompanied by the appropriate fee and the following documentation:
 - (a) a statement of the personal insolvency practitioner prepared under section 54 of the Act;
 - (b) the Debtor’s signed confirmation that he or she satisfies the eligibility criteria specified in section 91 of the Act;
 - (c) the declaration in writing of the Debtor referred to in section 91(1)(g) of the Act or in the alternative, the personal insolvency practitioner’s written confirmation as referred to in section 91(2) of the Act;

ISI Case Reference No.:

- (d) the Prescribed Financial Statement;
- (e) the statutory declaration of the Debtor referred to in section 91(1)(e) of the Act;
- (f) a schedule of creditors of the Debtor and the debts concerned, stating in relation to each such creditor the information specified in section 93(2)(e) of the Act;
- (g) the Debtor's written consent to the disclosure and processing of his or her personal data of the Debtor as specified in section 93(2)(f) of the Act;
- (h) the Debtor's written consent to the making of any enquiry under section 94 of the Act relating to the Debtor by the Insolvency Service;
- (i) such other documentation as may be requested in this application.

Application Form

APPLICATION QUESTIONS	
<p>Is this an individual application or a joint application?</p> <p>If this is a joint application each Debtor must complete the “Debtor’s Details” sections.</p>	<p>Individual <input type="checkbox"/> Joint <input type="checkbox"/></p>
<p>If an individual application, is it proposed that this application will be administered in common with one or more other Personal Insolvency Arrangements pursuant to Section 89(4) of the Personal Insolvency Act 2012? If yes, provide ISI case reference number(s) for the relevant arrangement(s).</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Case Reference No(s):</p>
<p>Are the total liabilities of the Debtor as determined on the basis of the Prescribed Financial Statement completed by the Debtor in respect of this application in excess of €2,500,000?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Has 25% or more of the Debtor’s debts (other than excluded debts) been incurred during the period of 6 months ending on the date of this application?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Is the aggregate of the debts of the Debtor which are secured debts less than €3,000,000?</p> <p>If no, have all of the creditors who are secured creditors consented in writing so that the limit of €3,000,000 shall not apply? If yes, please provide a copy of the consent with this application.</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>
<p>Is at least one of the creditors of the Debtor a secured creditor holding security over an interest in property (real or personal) of the Debtor situate in the State?</p>	<p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>

ISI Case Reference No.:

(DEBTOR'S DETAILS sections to be completed by all debtors in the case of a joint application)

DEBTOR'S DETAILS — Initial Information	
Has the Debtor received advice from the personal insolvency practitioner on the matters set out in section 52 of the Act?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Was the advice referred to in section 52(1)(c) of the Act confirmed in writing by the personal insolvency practitioner to the Debtor?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has the Debtor instructed the personal insolvency practitioner in writing to make a proposal for a Personal Insolvency Arrangement in accordance with Chapter 4 of the Act?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the Debtor agree to receiving by electronic means communications or notices required or permitted to be sent or given to the Debtor by the Insolvency Service from time to time in connection with the Act or related rules of court? Electronic communications or notices will be sent to the Debtor's email address provided in this application form.	Yes <input type="checkbox"/> No <input type="checkbox"/>
The Courts Service may wish to communicate with the Debtor, from time to time, by electronic means in connection with the Act or related rules of court. If such circumstances arise, does the Debtor agree to receiving by electronic means communications or notices required or permitted to be sent or given to the Debtor by the Courts Service in connection with the Act or related rules of court? Electronic communications or notices will be sent to the Debtor's email address and/or mobile telephone number provided in this application form.	Yes <input type="checkbox"/> No <input type="checkbox"/>

DEBTOR'S DETAILS — Personal Details	
Surname:	
First name:	
Name as it appears on birth certificate:	
Is the Debtor or has the Debtor been known by any other name? If yes, please supply name(s):	Yes <input type="checkbox"/> No <input type="checkbox"/> Name(s):
Title:*	Mr Mrs Miss Ms Other (please specify)
Gender:*	Male Female Other
PPS number:	
Date of birth:	
Country of birth:	
Nationality:	
Current Marital Status:*	Single (never married) Married (first marriage, no previous annulment) Married (following previous annulment) Re-married (following death of spouse) Re-married (following divorce/annulment) Civil partnership Separated Divorced Widow/Widower
Current Address:	
Home telephone number:	
Mobile telephone number:	
Email address:	

ISI Case Reference No.:

DEBTOR'S DETAILS — Previous Addresses	
Has the Debtor had any previous addresses in the last 5 years?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please supply address(es):	Address(es): Start date and end date:

DEBTOR'S DETAILS — Employment Status	
What is the Debtor's current employment status?*	Employed Self-employed/Trading Unemployed Retired Student Housewife/husband Other (please specify)
<i>If "Employed" is chosen the following questions must be answered:</i>	
Occupation:	
Name of employer:	
Address of employer:	
Length of Service with employer: <i>Please specify in years and months.</i>	
<i>If "Self-employed/Trading" is chosen the following questions must be answered:</i>	
Occupation:	
Type of Business:	
Trading/Business Name:	
Address of Business:	
Was/Is the business registered for VAT?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please supply VAT number.	VAT number:
Is the Debtor a sole trader? If not, what is the percentage of the Debtor's ownership of the business?	Yes <input type="checkbox"/> No <input type="checkbox"/> Percentage:
When did the business start trading? <i>Please specify a year and a month.</i>	

DEBTOR'S DETAILS — Previous Businesses	
Has the Debtor ever carried on a business, other than that referred to in the Employment Status section above, under a trading/business name or any other name other than the Debtor's current name?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, please supply all previous name(s) and address(es)	Name(s) and Address(es): Start date and end date:

DEBTOR'S DETAILS — Insolvency Status	
Is the Debtor an undischarged bankrupt?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the Debtor a discharged bankrupt subject to a bankruptcy payment order?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the Debtor a person who is a specified debtor as respects a Debt Relief Notice which is in effect?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the Debtor a person who, as a debtor, is subject to a Debt Settlement Arrangement which is in effect?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Is the Debtor a person who, as a debtor, is subject to an arrangement under the control of the court under Part IV of the Bankruptcy Act 1988?	Yes <input type="checkbox"/> No <input type="checkbox"/>

ISI Case Reference No.:

DEBTOR'S DETAILS — Prior Insolvency Processes	
Has the Debtor been the subject of a protective certificate issued under section 95 of the Act less than 12 months prior to the date of this application?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has the Debtor had his or her debts discharged pursuant to a final Debt Relief Notice less than 3 years prior to the date of this application?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has the Debtor had his or her debts discharged pursuant to a Debt Settlement Arrangement less than 5 years prior to the date of this application?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has the Debtor been discharged from bankruptcy less than 5 years prior to the date of this application?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has the appropriate court made an order referred to in section 91(3) of the Act stating that it is satisfied that the current insolvency of the Debtor arises by reason of exceptional circumstances or other factors which are substantially outside the control of the Debtor and that it would be just to permit the Debtor to make a proposal for a Personal Insolvency Arrangement? If yes, please provide a copy of the order with this application. <i>Only to be answered if any of the previous four questions are answered in the positive.</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Has the Debtor ever entered into a Personal Insolvency Arrangement?	Yes <input type="checkbox"/> No <input type="checkbox"/>

DEBTOR'S DETAILS — Other Eligibility Criteria	
Is the Debtor domiciled in the State, or within one year before the date of this application, has the Debtor ordinarily— (i) resided in the State, or (ii) had a place of business in the State?*	Yes <input type="checkbox"/> No <input type="checkbox"/> Domiciled Resided Business
Is the Debtor insolvent within the meaning of the Act?	Yes <input type="checkbox"/> No <input type="checkbox"/>

REASONABLE LIVING EXPENSES (RLE)	
For the purposes of calculating the monthly total set costs under the guidelines on a reasonable standard of living and reasonable living expenses issued under Section 23 of the Act (the “Reasonable Living Expenses Guidelines”), is this a one adult household or a two adult household?*	One adult household Two adult household
Does the Debtor have any dependent children (under 19 years of age) living with him or her? <i>If yes, complete — Reasonable Living Expenses — Children.</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
Does the Debtor own a motor vehicle?	Yes <input type="checkbox"/> No <input type="checkbox"/>
If yes, does the Debtor require a motor vehicle?	Yes <input type="checkbox"/> No <input type="checkbox"/>
The monthly total set costs under the Reasonable Living Expenses Guidelines for the Debtor’s typical household are:	€
Does the Debtor have any childcare costs? If yes, please give the monthly expenditure amount assessed to be reasonable by the personal insolvency practitioner in accordance with the Reasonable Living Expenses Guidelines.	Yes <input type="checkbox"/> No <input type="checkbox"/> Monthly amount: €
How much is the Debtor’s monthly rent, mortgage repayment or other accommodation costs assessed to be reasonable by the personal insolvency practitioner in accordance with the Reasonable Living Expenses Guidelines?	€
Does the Debtor have any expenditure in relation to special circumstances, which is required to be taken into account when calculating his or her reasonable living expenses? <i>If yes, complete — Reasonable Living Expenses — Special Circumstances.</i>	Yes <input type="checkbox"/> No <input type="checkbox"/>
In the case of a two adult household, has the Debtor rebutted the presumption of an equal split of the reasonable living expenses between them?	Yes <input type="checkbox"/> No <input type="checkbox"/>
What percentage of the Debtor’s household reasonable living expenses should be attributed to the Debtor?	Percentage:
The Debtor’s reasonable living expenses are:	€

ISI Case Reference No.:

REASONABLE LIVING EXPENSES — Children	
For the purposes of calculating the Debtor's reasonable living expenses under the Reasonable Living Expenses Guidelines, which of the following age categories does the Debtor's child(ren) fall into?*	Infant (0-2) Pre-school (3) Primary school (4-11) Secondary school (12-18)

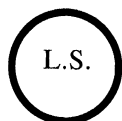
REASONABLE LIVING EXPENSES — Special Circumstances	
Please give the monthly expenditure amount and details of this expenditure.	Monthly amount: € Details:

JURISDICTION Only applicable if Circuit Court Application	
With reference to section 5(2) of the Act, please specify relevant County of the Debtor.	
Circuit Court:	
Reason for specifying County:*	Debtor residing at the time of this application Debtor resided within one year of the time of this application Debtor has a place of business at the time of this application Debtor had a place of business within one year of the time of this application

ISI Case Reference No.:

Signature of Debtor:	_____
Printed Name of Debtor:	_____
Date:	_____

Note: This document will be completed in electronic format on such electronic platform that the Insolvency Service may from time to time make available or otherwise specify for such purpose, following which, the information will be processed into an output format which may be in electronic form or printed on paper. Where any item in this document is completed to the effect of 'no', or any item in this document is not completed, that information may not appear on such output format and any person reviewing the output format should proceed on the basis that, where the output format does not refer to such information, the relevant item was either completed by selecting 'no' or the relevant item was not applicable in that instance. In this document, where an asterisk (*) is used and a choice is provided of the appropriate response, the response selected will appear in the output format. This note will not appear on the output format.



GIVEN under the seal of the Insolvency Service of Ireland,
30 August 2013.

LORCAN O'CONNOR,
Director of the Insolvency Service of Ireland.

EXPLANATORY NOTE

(This note is not part of the Instrument and does not purport to be a legal interpretation)

These Regulations prescribe the form to be used when making an application to the Insolvency Service of Ireland for a protective certificate in respect of a proposal for a Personal Insolvency Arrangement.

BAILE ÁTHA CLIATH
ARNA FHOILSIÚ AG OIFIG AN tSOLÁTHAIR
Le ceannach díreach ó
FOILSEACHÁIN RIALTAIS,
52 FAICHE STIABHNA, BAILE ÁTHA CLIATH 2
(Teil: 01 - 6476834 nó 1890 213434; Fax: 01 - 6476843)
nó trí aon díoltóir leabhar.

DUBLIN
PUBLISHED BY THE STATIONERY OFFICE
To be purchased from
GOVERNMENT PUBLICATIONS,
52 ST. STEPHEN'S GREEN, DUBLIN 2.
(Tel: 01 - 6476834 or 1890 213434; Fax: 01 - 6476843)
or through any bookseller.

€3.81



Wt. (B30030). 285. 8/13. Clondalkin. Gr 30-15.